2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000157032

Entity Name: GO DADDY GOLF & CUSTOM CARTS, INC.

FILED Apr 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1086 LAKEVIEW DRIVE 6425 US HWY 27 SOUTH UNIT #3

SEBRING, FL 33870 SEBRING, FL 33870

Current Mailing Address: New Mailing Address:

1086 LAKEVIEW DRIVE 4464 ALCANTARRA AVE SEBRING, FL 33870 SEBRING, FL 33872

FEI Number: 32-0187744 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WILLIARD, MARK D

1086 LAKEVIEW DRIVE

SEBRING, FL 33870 US

WILLIARD, MARK D

6425 US HWY 27 SOUTH UNIT #3

SEBRING, FL 33870 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 04/08/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete Name: WILLIARD, MARK D

Address: 4464 ALCANTARRA AVENUE City-St-Zip: SEBRING, FL 33872

City-St-Zip: SEBRING, FL 33872

City-St-Zip:

Title: STD () Delete
Name: WILLIARD, ESTHER L
Address: 4464 ALCANTARRA AVENUE

SEBRING, FL 33872

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition

Name: WILLIARD, MARK D Address: 4464 ALCANTARRA AVENUE City-St-Zip: SEBRING, FL 33872

Title: VP (X) Change () Addition

Name: WILLIARD, ESTHER L Address: 4464 ALCANTARRA AVENUE City-St-Zip: SEBRING, FL 33872

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ESTHER L WILLIARD VP 04/08/2009